

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.	10-724-414	FILING DATE	12-01-03
APPLICANT(S)			

CLAIMS

1	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
2						
3						
4	1					
5						
6		(1)				
7	1					
8						
9						
10						
11						
12						
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32						
33	1					
34						
35						
36						
37						
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39						
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41						
42						
43						
44						
45						
46						
47	1					
48						
49						
50						
TOTAL IND.	4					
TOTAL DEP.	3	→	→	→	→	→
TOTAL CLAIMS	7	■	■	■	■	■

51	IND	DEP	IND	DEP	IND	DEP
52						
53						
54						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.	→	→	→	→	→	→
TOTAL CLAIMS	■	■	■	■	■	■